A97000002295

Holland & Knight LLP
Requester's Name

315 So. Calhoun Street
Address

425-5675
City/State/Zip Phone #

FILED
01 JUL -9 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. Ivybrook Partnership Ltd A97-2295
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

200004465002--4
-07/09/01--01094--013
*****25.00 *****25.00

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

BK

☐ Walk in ☐ Pick up time _____ ☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

**AMENDMENTS**

☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

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CORPORATION

**OTHER FILINGS**

☐ Annual Report
☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

☐ Foreign
☒ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

LP- 25.00

Examiner's Initials

CR2E031(7/97)

**STATEMENT OF QUALIFICATION FOR**
**FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP**

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TALLAHASSEE, FLORIDA

1. The name of the limited partnership as identified in the records of the Florida Department of State: Ivybrook Partnership, Ltd.

Insert limited partnership's Florida document number: A97000002295
or
Attach certificate of limited partnership, affidavit of capital contributions and applicable limited partnership filing fees.

2. Suffix adopted for the above named partnership: LLLP
(LLLP, L.L.L.P.)

3. The street address of its chief executive office: _____
(if different from current recorded address): _____

4. The street address of principal office in Florida: _____
(if different from above) _____

5. The limited partnership hereby elects to be a limited liability limited partnership.

6. The effective date of this filing shall be:
_x_ as of the date this document is filed with the Florida Secretary of State
or
___ a date later than the time of filing: _____.

7. The name and Florida street address of the partnership's agent for service of process:
Intrastate Registered Agent Corporation
701 Brickell Ave., Ste. 3000
Miami, Florida 33131

The execution of this statement as a partner constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Signed this 6th day of July, 2001.

Signature of TWO Partners: Margaret H. O'Malley, V.P., Jimar, Inc. GPr.
Margaret H. O'Malley, LPr.

Typed or printed names of partners signing above: Margaret H. O'Malley, V.P., Jimar, Inc., GPr.
Margaret H. O'Malley, LPr.

Filing Fee: $25.00
Certified Copy (optional): $52.50
Certificate of Status (optional): $8.75

INHS66(1/00)